

**FEE: \$20.00**

False statement on this application subject to penalty prescribed by law.  
 Fee must be enclosed with application. Do not send cash or postage.  
 Make check or money order payable to the D.C. Treasurer.

**District of Columbia  
 TITLE NO.**

**DISTRICT OF COLUMBIA  
 MOTOR VEHICLE SERVICES**

**APPLICATION FOR DUPLICATE CERTIFICATE OF TITLE  
 TITLE WILL NOT BE RELEASED WITHOUT PROPER IDENTIFICATION**

I (we) hereby make application for the issuance of a duplicate Certificate of Title under the provisions of the Motor Vehicle Title and Registration Regulations, Title 18, Sec. 406.

OWNERS FULL NAME (PRINT)	LAST NAME	FIRST NAME	MIDDLE NAME (NOT INITIAL)	D.C. PERMIT NO.	DATE OF BIRTH
JOINT-OWNER FULL NAME (PRINT)	LAST NAME	FIRST NAME	MIDDLE NAME (NOT INITIAL)	D.C. PERMIT NO.	DATE OF BIRTH
PRESENT ADDRESS	(NO.)	(STREET)	(SECTION)	(CITY)	(STATE) (ZIP CODE)

**DESCRIPTION OF MOTOR VEHICLE OR TRAILER**

LEAVE BLANK Data	TRADE NAME	YEAR	BODY STYLE	WEIGHT	SERIAL NUMBER
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**ODOMETER STATEMENT**

I CERTIFY TO THE BEST OF MY KNOWLEDGE THAT THE ODOMETER READING IS \_\_\_\_\_  
 AND REFLECTS THE ACTUAL MILEAGE OF THE VEHICLE UNLESS ONE OF THE FOLLOWING STATEMENTS IS CHECKED: ☐ THE AMOUNT OF MILEAGE STATED IS IN EXCESS OF  
 99,999 MILES OR ☐ THE ODOMETER READING IS NOT THE ACTUAL MILEAGE.

- Reason for requiring duplicate: ☐ Lost ☐ Destroyed ☐ Altered ☐ \_\_\_\_\_  
 Other (Explain) \_\_\_\_\_
- Number on D.C. Certificate of Title \_\_\_\_\_ D.C. Tag# \_\_\_\_\_
- Is there an existing lien, chattel mortgage, unpaid balance, etc.: ☐ Yes-Go to Item 4 ☐ No-Go to Item 5
- (a) Name of Lienholder: \_\_\_\_\_  
 (b) Address of Lienholder: \_\_\_\_\_  
 (c) Lien amount, as shown on the original District of Columbia Title: \$ \_\_\_\_\_

\_\_\_\_\_  
 (Signature of Lienholder)

\_\_\_\_\_  
 (Date)

- If there was a lien shown on the original Certificate of Title, it will be necessary for the applicant to provide proof that the lien has been satisfied.

Under penalties provided by law, I the undersigned applicant declare that I have examined this application and accompanying documents and to the best of my knowledge and belief, it is true, correct and complete.

Signature of applicant(s) \_\_\_\_\_  
 (Must be signed by owner(s), Officer of Corporation, or partner in partnership)

**PENALTY**

A \$50.00 penalty will be imposed for a dishonored check given in payment of this application